



Jeffrey A. Meyers
Commissioner

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Director

STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION FOR BEHAVIORAL HEALTH
BUREAU OF MENTAL HEALTH SERVICES

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April 3, 2018

William Rider, CEO
The Mental Health Center of Greater Manchester
401 Cypress Street
Manchester, NH 03103

Dear Mr. Rider,

Enclosed is the Supported Employment Fidelity Report that was completed on behalf of the Division for Behavioral Health of the Department of Health and Human Services for The Mental Health Center of Greater Manchester. This review took place from March 20, 2018 through March 22, 2018. The Fidelity Review is one component of compliance with the Community Mental Health Settlement Agreement to evaluate the quality of services and supports provided by New Hampshire's Community Mental Health Center system. It is also the goal that these reviews are supportive in nature and enable your Community Mental Health Center to identify areas of strength and areas in need of improvement. Through this, the outcomes and supportive services for all consumers will be improved.

MHCGM is invited to review the report and respond within 30 calendar days from date of this letter addressing the fidelity items listed below. These items have been chosen for your attention as your center scored a 3 or below on them. We ask that you develop a QIP for each item and then upon completion we will work together to prioritize at least 3 to focus on throughout the next 12 months. In order to align QIPs across DHHS, please find the attached QIP response template. This template is our effort to integrate QSR and Fidelity SE Reviews into QIPs that communicate and support each other, further decreasing the administrative burden for your center. Please address these in a QIP to my attention, via e-mail, by the close of business on May 3, 2018.

- Staffing
 - No items to address
- Organization
 - O7: Agency Focus on Competitive Employment
- Services
 - S5: Individualized Job Search
 - S8: Diversity of Job Types
 - S14: Assertive Engagement and Outreach by Integrated Team

Thank you to all of the MHCGM staff for the assistance and time they dedicated to this review. Please contact me with any questions or concerns you may have.

William Rider, CEO of MHCGM

4/3/2018

Page 2 of 2

Sincerely,

A handwritten signature in cursive script, appearing to read "Lauren Quann".

Lauren Quann, MS
Administrator of Operations
Bureau of Mental Health Services
Lauren.Quann@dhhs.nh.gov
603-271-8376

LAQ/laq

Enclosures: MHCGM Initial Fidelity Review

CC: Karl Boisvert, Diana Lacey, Susan Drown, Julianne Carbin



Supported Employment Fidelity Review

Mental Health Center of Greater Manchester

On Site Review Dates: March 20th, 21st, & 22nd, 2018

Final Report Date: April 2nd, 2018

David Lynde, LICSW
Dartmouth Hitchcock Medical Center
Evidenced-Based Practice Trainer & Consultant

Christine Powers, LICSW
Dartmouth Hitchcock Medical Center
Evidenced-Based Practice Trainer & Consultant

ACRONYMS

ACT - Assertive Community Treatment
BMHS - NH Bureau of Mental Health Services
CMHC - Community Mental Health Center
CSP - Community Support Program
DHHS - Department of Health and Human Services
DHMC - Dartmouth Hitchcock Medical Center
EBP - Evidence-Based Practice
ES - Employment Specialist
MH - Mental Health
MH Tx Team - Mental Health Treatment Team
NH - New Hampshire
NHH - New Hampshire Hospital
PSA - Peer Support Agency
QA - Quality Assurance
QIP - Quality Improvement Program
SAS - Substance Abuse Specialist
SE - Supported Employment
SMI - Severe Mental Illness
SPMI - Severe and Persistent Mental Illness
TL - Team Leader
Tx - Treatment
VR - Vocational Rehabilitation

AGENCY DESCRIPTION

Christine Powers, LICSW and David Lynde, LICSW from Dartmouth Hitchcock Medical Center conducted an SE Fidelity Review with the Mental Health Center of Greater Manchester (MHCGM) on March 20th, 21st, and 22nd, 2018. The MHCGM SE team is based out of the 1555 Elm Street, Manchester, NH location. The MHCGM Supported Employment team works with the following treatment teams: North End Counseling (NEC) team, Continuous Treatment Team (CTT) ACT team, Mobile Community Support Team (MCST) ACT team, Meds Only team, and Clinical Case Management (CCM) team.

METHODOLOGY

The reviewers are grateful for the professional courtesies and work invested by the MHCGM staff in developing and providing these activities as part of SE fidelity review process.

The sources of information used for this review included:

- Reviewing SE client records
- Reviewing documents regarding SE services
- Reviewing data from the SE team
- Observation of Integrated Mental Health Treatment Team Meeting
- Observations of job development with employers in the community
- Interviews with the following: Members of the Executive Leadership Team, SE Supervisor, Employment Specialists, Medication Prescribers, other CMHC staff, and a regional Vocational Rehabilitation counselor
- Meeting with SE clients

KEY☒ = In effect☐ = Not in effect**REVIEW FINDINGS AND RECOMMENDATIONS**

The following table includes: Fidelity items, numeric ratings, rating rationale, and recommendations. Ratings range from 1 to 5 with 5 being highest level of implementation.

#	Item	Rating	Rating Rationale	Recommendations
STAFFING				
1	Caseload Size	5	10 Employment Specialists are currently serving 177 clients in SE Services. The ratio of clients to Employment Specialists is 18:1.	
2	Employment Services Staff	5	Employment Specialists provide SE services at least 96% of the time.	
3	Vocational Generalists	5	Employment Specialists carry out a full range of SE activities with clients including: <ul style="list-style-type: none"> <input checked="" type="checkbox"/> engagement <input checked="" type="checkbox"/> completing vocational profiles <input checked="" type="checkbox"/> developing employment goals <input checked="" type="checkbox"/> job search <input checked="" type="checkbox"/> job development and <input checked="" type="checkbox"/> follow along supports for employed clients. 	
ORGANIZATION				
1	Integration of Rehab w/MH Tx through team assignment	5	Employment Specialists are attached to one or two mental health treatment teams, from which approximately 91% of the Employment Specialists' caseloads are compromised.	

#	Item	Rating	Rating Rationale	Recommendations
2	Integration of Rehab w/MH Tx through frequent contact	4	<p>The following is the MHCGM's SE team assignment and treatment team meeting attendance, according to data and staff reports:</p> <ul style="list-style-type: none"> - The NEC team has 6 assigned Employment Specialists, and each of these Employment Specialists attend one team weekly, either on Tuesday or Friday. - The CCM team has 4 assigned Employment Specialists, and each of these Employment Specialists attend one team weekly, either on Tuesday or Friday. - The MCST ACT team has 5 assigned Employment Specialists, and 3 of the 5 Employment Specialists attend one of the daily ACT team meetings weekly. These 3 Employment Specialist cover for the other 2 assigned Employment Specialists who do not attend regularly. - The CTT ACT team has 3 assigned Employment Specialists, and each of these Employment Specialists attend one of the ACT daily team meetings weekly. - The Med Services team has 3 assigned Employment Specialists, and 1 of these Employment Specialists attends the monthly team meeting. This Employment Specialist covers for the 2 other assigned Employment Specialists who do not attend regularly. <ul style="list-style-type: none"> <input checked="" type="checkbox"/> The majority of Employment Specialists attend weekly mental health treatment team meetings. <input checked="" type="checkbox"/> Employment Specialists participate actively in treatment team meetings with shared decision-making. 	<p>The SE Team Leader should explore ways for all Employment Specialists assigned to the MCST ACT team to attend a treatment team meeting at least weekly. The SE Team Leader should explore ways for all Employment Specialists assigned to the Med Services team to attend each monthly treatment team meeting. Increasing contact with an integrated team provides a more cohesive team approach, keeping current on client goals and clinical information, learning about potential job leads, and assisting the team with identifying clients that may benefit from the SE program.</p> <p>While Employment Specialists do attend the entirety of treatment team meetings for several treatment teams, Employment Specialists do not attend the entire treatment team meeting during the NEC team meeting. It is important to assure at least 1 Employment Specialist is present for the whole NEC team meeting to help other team members think about employment for clients who have not yet been referred to SE services.</p>

#	Item	Rating	Rating Rationale	Recommendations
			<input checked="" type="checkbox"/> Employment services documentation (i.e., vocational profile, employment plan, progress notes) is integrated into client's mental health treatment record. <input checked="" type="checkbox"/> Employment Specialists' offices are in close proximity to (or shared with) their mental health treatment team members. <input type="checkbox"/> Employment Specialists help the team think about employment for people who haven't yet been referred to Supported Employment services. - Employment Specialists stay for the entire team for the CCM, CTT, MCST, and Meds team and help these teams think about employment for people not in SE. However, the Employment Specialists on the NEC team only stay for the beginning of team meetings to review clients already in SE.	
3	Collaboration between Employment Specialist & VR Counselor	5	<input checked="" type="checkbox"/> Employment Specialists and Vocational Rehabilitation counselors have client-related contacts (phone, e-mail, in-person) at least monthly to discuss shared clients. <input checked="" type="checkbox"/> The SE Team and VR counselors have scheduled face-to-face meetings at least monthly to discuss referrals.	
4	Vocational Unit	5	<input checked="" type="checkbox"/> The SE team has 10 full time Employment Specialists and an SE Team Leader that form an employment unit. <input checked="" type="checkbox"/> The SE team has client-based group supervision twice per week based on the Supported Employment model in which strategies are identified. <input checked="" type="checkbox"/> Job leads are shared. <input checked="" type="checkbox"/> The SE team provides coverage for each other's caseloads when needed.	

#	Item	Rating	Rating Rationale	Recommendations
5	Role of Employment Supervisor	5	<p>The SE supervisor carries out the following supervision functions:</p> <ul style="list-style-type: none"> ☑ The SE Supervisor is responsible for supervising 10 FTE Employment Specialists. ☑ The SE Supervisor conducts SE team meetings twice per week. ☑ The SE Supervisor works to assure integration with different treatment teams. ☑ The SE Supervisor takes an active role in training, and providing field mentoring for new SE staff. ☑ The SE Supervisor regularly reviews the employment rate of clients in the SE program and establishes new goals for increasing that employment rate. 	Given the size of the MHCGM Supported Employment program, the agency should consider dedicating the SE Team Leader's time solely to the SE program.
6	Zero Exclusion Criterion	5	<ul style="list-style-type: none"> ☑ All clients interested in working have access to SE. ☑ Mental Health practitioners encourage clients to consider employment, and referrals for Supported Employment are solicited by many sources. ☑ Employment Specialists offer help with another job when one has ended, regardless of the reason that the job ended or number of jobs held. 	
7	Agency Focus on Competitive Employment	3	<p>The agency promotes competitive work through multiple strategies, including:</p> <ul style="list-style-type: none"> ☑ Agency intake includes questions about employment. ☑ Agency includes questions about interest in employment on all annual (or semi-annual) assessment or treatment plan reviews. ☑ Agency displays written postings (e.g., brochures, bulletin boards, posters) about working and Supported Employment services, in lobby and other waiting areas. 	The agency should consider developing multiple formal ways for clients who are not yet employed to hear employment success stories from SE clients. One example is having a panel of employed clients speaking to clients who are not yet working.

#	Item	Rating	Rating Rationale	Recommendations
			<input type="checkbox"/> Agency supports ways for clients to share work stories with other clients and staff (e.g., agency-wide employment recognition events, in-service training, peer support groups, agency newsletter articles, invited speakers at client treatment groups, etc.) at least twice a year. <input type="checkbox"/> Agency measures rate of competitive employment on at least a quarterly basis and shares outcomes with agency leadership and staff.	The agency should explore ways to measure and share the competitive employment rate for all clients across the agency, in addition to the employment rate for clients in the SE program. Sharing the employment rate across the agency educates agency staff about work as a recovery goal, program performance, and program goals.
8	Executive Team Support for SE	5	<input checked="" type="checkbox"/> Executive Director and Clinical Director demonstrate knowledge regarding the principles of SE. <input checked="" type="checkbox"/> Agency QA process includes an explicit review of the SE program, or components of the program; agency QA process uses the results of the fidelity assessment to improve SE implementation and sustainability. <input checked="" type="checkbox"/> At least one member of the executive team actively participates at SE leadership team meetings (steering committee meetings) that occur at least every six months for high fidelity programs and at least quarterly for programs that have not yet achieved high fidelity. <input checked="" type="checkbox"/> The agency CEO/Executive Director communicates how SE services support the mission of the agency and articulates clear and specific goals for SE and/or competitive employment to all agency staff during the first six months and at least annually; this item is not delegated to another administrator. <input checked="" type="checkbox"/> SE program leader shares information about EBP barriers and facilitators with the executive team (including the CEO) at least twice each year. The executive team helps the program leader identify and implement solutions to barriers.	

#	Item	Rating	Rating Rationale	Recommendations
SERVICES				
1	Work Incentive planning	4	<p> <input type="checkbox"/> All clients are offered assistance in obtaining comprehensive, individualized work incentives planning by a specially trained work incentives planner before starting a new job and assistance accessing work incentives planning thereafter when making decisions about changes in work hours and pay. </p> <p> <input checked="" type="checkbox"/> Work incentives planning includes SSA benefits, medical benefits, medication subsidies, housing subsidies, food stamps, spouse and dependent benefits, past job retirement benefits and any other source of income. </p> <p> <input checked="" type="checkbox"/> Clients are provided information and assistance about reporting earnings to different benefit programs. </p> <p> <input checked="" type="checkbox"/> Clients are given information on where to access information about benefit planning. </p> <p> The MHCGM SE Team is very active in assisting SE clients to understand their current benefits. Employment Specialists refer clients to Health and Human Services (HHS), as well as the Social Security (SS) office, as well as provide support by attending HHS and SS appointments with SE clients. Employment Specialists also assist some clients with obtaining Medicaid for Employed Adults with Disabilities (MEAD). </p> <p> Information from records and staff reports indicate that the primary method of managing benefits is to instruct clients to stay under substantial gainful activity (SGA). </p>	<p> The agency provides some basic benefits counseling and instructs clients to stay under SGA as the primary method of managing benefits. While staying under the SGA is one strategy for working with benefits, it is not the only strategy and keeps a limit on how much clients can earn and how self-independent clients can become when using the multiple work incentive programs available. It is important for the agency to identify specially trained providers who can develop comprehensive work incentive counseling reports with multiple options for clients so they can make informed decisions about benefits and income with comprehensive and multiple options. These services are typically provided by a Certified Work Incentives Counselor (CWIC) who receives several hours of intensive training due to the complexity and variety of work incentive options. Such services may be found at Granite State Independent Living, as one example. </p>

#	Item	Rating	Rating Rationale	Recommendations
2	Disclosure	5	<ul style="list-style-type: none"> ☑ Employment Specialists do not require all clients to disclose their psychiatric disability at the work site in order to receive services. ☑ Employment Specialists offer to discuss with clients the possible costs and benefits of disclosure at the work site in advance of clients disclosing at the work site. Employment specialists describe how disclosure relates to requesting accommodations and the employment specialist's role communicating with the employer. ☑ Employment Specialists discuss specific information to be disclosed (e.g., disclose receiving mental health treatment, or presence of a psychiatric disability, or difficulty with anxiety, or unemployed for a period of time, etc.) and offer examples of what might be said to employers. ☑ Employment Specialists discuss disclosure on more than one occasion (e.g., if clients have not found employment after two months or if clients report difficulties on the job). 	
3	Ongoing, Work-based Vocational Assessment	5	<ul style="list-style-type: none"> ☑ Developing the vocational profile occurs over 2-3 sessions and information is documented on a vocational profile that includes preferences, experiences, skills, current adjustment, strengths, personal contacts, etc. ☑ The vocational profile is used to identify job types and work environments. ☑ The majority of vocational profiles are updated on a regular basis. ☑ Employment Specialists help clients learn from each job experience and also work with the treatment team to analyze job loss, job problems and job successes. 	

#	Item	Rating	Rating Rationale	Recommendations
4	Rapid Job Search for Competitive Employment	4	<p>According to the data reviewed, the first face-face contact with an employer by the client or an Employment Specialist about a competitive job is on average 34 days after program entry.</p> <p><input checked="" type="checkbox"/> The SE program tracks employer contacts.</p>	<p>It might be helpful for the SE Team Leader to work with the SE team to assure they are documenting first employer contacts regularly and clearly in progress notes. A report that could be helpful for this item as well as tracking other SE items might include tracking of the following data:</p> <ul style="list-style-type: none"> - When the client started SE service - Date of first face-face potential employer contact - Date of interview(s) - Date of job start - Employer and location - Disclosure permission for follow-along support <p>This tool can assist in carrying out services more efficiently, as well aide in group supervision, coverage, tracking, and improving program outcomes.</p>
5	Individualized Job Search	3	<p><input type="checkbox"/> Employment Specialists appear to make employer contacts based on job choices which reflect client's preferences, strengths, symptoms, and lessons learned from previous jobs 90-100% of the time.</p> <p>- According to records reviewed, Employment Specialists appear to make employer contacts aimed at making a good job match based on client's preferences relating to what the person enjoys and their personal goals 60% of the time. Some clients did not have personally meaningful employment goals.</p> <p><input checked="" type="checkbox"/> Employer contacts are consistent with the current employment/job search plan.</p> <p><input checked="" type="checkbox"/> When clients have limited work experience, Employment Specialists provide information about a range of job options in the community.</p>	<p>The SE Team Leader should provide guidance to Employment Specialists about assisting clients with developing specific and personally meaningful employment goals that include the nature of desired employment and other specific preferences. Clients in SE are much more likely to be motivated about employment when they have specific individual goals.</p> <p>The SE Team might benefit from using a standard form for indicating each individual client's employment goals that are specific, clear and has the date for each change. This might be done using an "individual employment plan." Goals should always indicate what the client's specific employment goals and preferences are and should be updated frequently and consistently. This form provides person-centered direction for SE services.</p>

#	Item	Rating	Rating Rationale	Recommendations
6	Job Development - Frequent Employer Contact	4	<p>According to the data reviewed, Employment Specialists make approximately 5 face-face employer contacts on average that are client specific per week.</p> <ul style="list-style-type: none"> ☑ Employment Specialists use a system for tracking employer contacts. ☑ The tracking system is reviewed by the SE Supervisor on at least a weekly basis. <p>Employments Specialists frequency in face-to-face employer contacts varied greatly, anywhere from 1.8 employer contacts per week to 12 employer contacts per week.</p> <p>Several of the contacts listed in the log development log were follow along supports for employed clients, without any evidence of developing new opportunities for clients in the job search phase.</p>	<p>Employment Specialists should make 6 in-person employment contacts each week. Those contacts should be regularly documented in a job development log accessible to all SE staff members. Frequent job development allows for Employment Specialists to be knowledgeable about fluctuating requirements of different jobs and the range and needs of employers in their community. The SE Team Leader might want to track each Employment Specialist's job development contacts and provide supervision to Employment Specialists who are not making at least 6 quality face-face employer contacts per week, on average.</p> <p>Several of the contacts listed in the log development log were follow along supports for employed clients. The job development log is intended to track and monitor job development for clients who are searching for employment. The SE Team Leader may want to provide supervision and training about the use of the job development log.</p>
7	Job Development - Quality of Employer Contact	5	<ul style="list-style-type: none"> ☑ Employment Specialists meets employer when helping clients turn in job applications. ☑ Employment Specialists contact employers to ask about job openings and shares "leads" with clients. ☑ Employment Specialists follow up on job openings by introducing self, describing program, and asking employer to interview client. ☑ Employment Specialists meet with employers in person, and advocates for clients. ☑ Employment Specialists build relationships with employers through multiple visits in-person. 	

#	Item	Rating	Rating Rationale	Recommendations
8	Diversity of Job Types	3	According to the data reviewed, Employment Specialists assist clients to obtain different types 60% of the time.	<p>The SE Team Leader should provide guidance to the Employment Specialists about assisting clients with developing specific and personally meaningful employment goals that include the nature of desired employment and other specific preferences. When Employment Specialists make employer contacts aimed at making a good job match based on client's preferences and needs, SE clients are likely to have a wider variety of job types.</p> <p>Additionally, the SE Team should develop working relationships with identified community employers that match with each client's specific employment goals via job development.</p>
9	Diversity of Employers	4	According to the data reviewed, Employment Specialists assist clients to obtain jobs with different employers 82% of the time.	<p>The SE Team Leader should provide guidance to the Employment Specialists about assisting clients with developing specific and personally meaningful employment goals that include the nature of desired employment and other specific preferences. When Employment Specialists make employer contacts aimed at making a good job match based on client preferences and needs, SE clients are likely to have a wider variety of employers.</p> <p>Additionally, the SE Team should develop working relationships with identified community employers that match with each client's specific employment goals via job development.</p>

#	Item	Rating	Rating Rationale	Recommendations
10	Competitive Jobs	5	<p>According to the data reviewed, Employment Specialists provide options for permanent competitive jobs at least 95% of the time.</p> <p><input checked="" type="checkbox"/> SE clients were not placed in jobs that were created for people with disabilities.</p>	
11	Individualized Follow-along Supports	4	<p><input checked="" type="checkbox"/> Clients receive different types of support for working a job that are based on the job, client preferences, work history, needs, etc.</p> <p><input checked="" type="checkbox"/> Employment Specialists provide employer support at clients' requests.</p> <p><input type="checkbox"/> Employment Specialists help clients move onto more preferable jobs and also helps with school or certified training programs.</p> <p>- There were a number of already employed clients who had work goals to move into new or more preferable jobs for several years without any evidence of change.</p> <p><input checked="" type="checkbox"/> The site provided examples of different types of support including enhanced supports by treatment team members.</p> <p>- The type of follow along supports provided to clients appears to vary significantly by the culture of the different treatment teams, ranging from numerous intense supports on ACT teams to limited to no supports on NEC and Meds teams.</p>	<p>There were several clients who had work goals to move into new or more preferable jobs for several years without any evidence of change. The SE Team Leader might want to review such SE clients with the SE team to come up with strategies to assist these clients in pursuing more preferable and meaningful employment.</p> <p>Support that is related to the person's work history, preferences, strengths, and supports, should be provided by a variety of people from the client's treatment team. Examples of types of supports the whole treatment team might help with include: Med adjustments related to work, budgeting, social skills training, rides to work, working with family around the client's job, encouragement regarding work, and help with grooming or dress for the job. The SE Team Leader might want to work with each treatment team to provide education about how members of the team can provide enhanced supports around employment.</p>

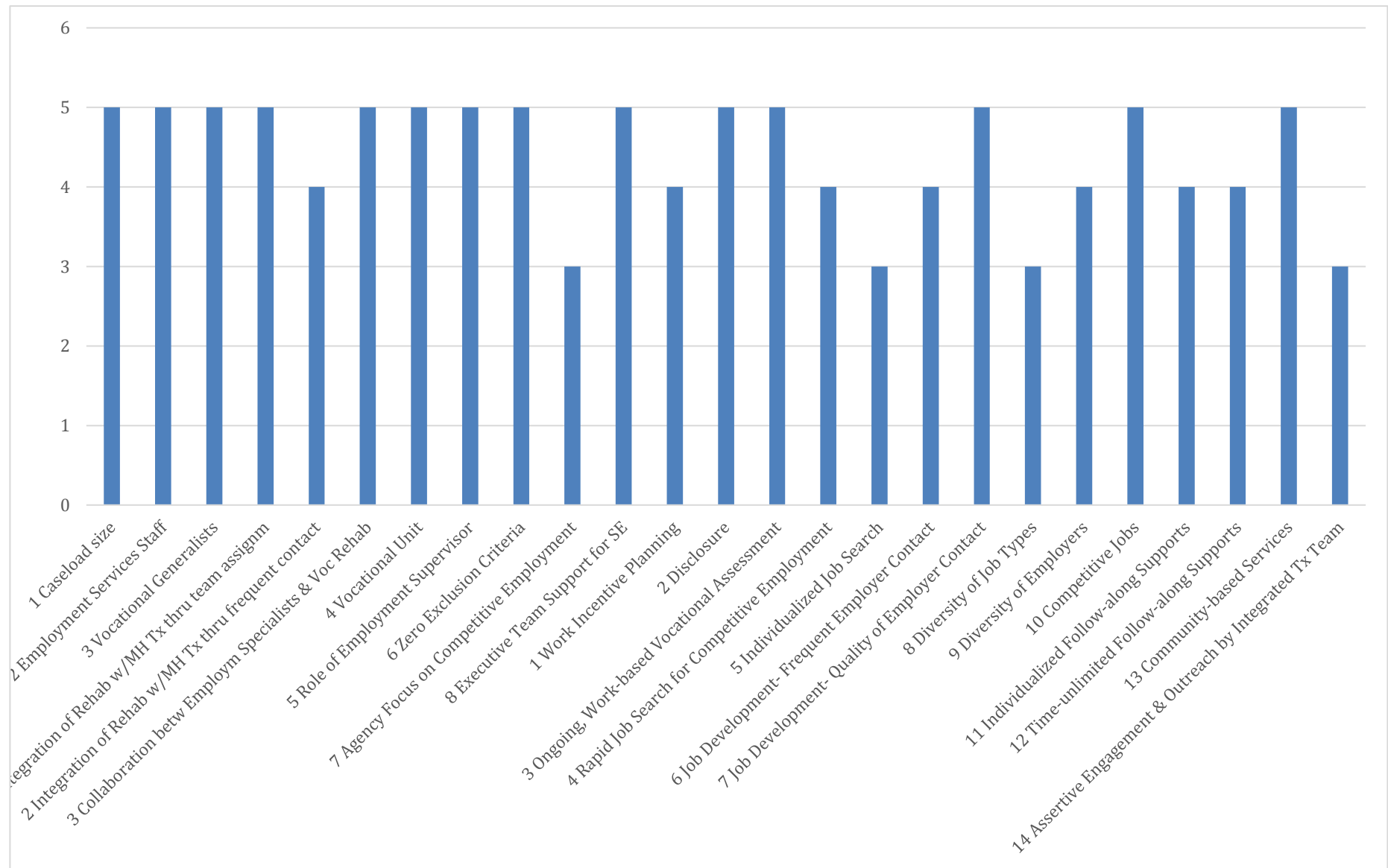
#	Item	Rating	Rating Rationale	Recommendations
12	Time-unlimited Follow-along supports	4	<ul style="list-style-type: none"> - Employment Specialists have face-to-face contact within 1 week before starting a job about 75% of the time, on average. - Employment Specialists have face-to-face contact within 3 days after starting a job 75% of the time, on average. - Employment Specialists have face-to-face contact at least monthly for a year or more 50% of the time, on average, after working steadily and desired by clients. <p>Clients are not regularly transitioned to step down job supports from mental health worker following steady employment.</p>	<p>The SE Team Leader should emphasize the need for the Employment Specialist to develop follow along support strategies for the critical time period right around job starts.</p> <p>The SE Team might also want to consider regularly reviewing all SE clients to evaluate which clients' follow along supports might be transferred to other members of the Mental Health Treatment Team, as there were several SE clients that appeared to be working successfully with limited SE support.</p>
13	Community Based Services	5	Employment Specialists spend 65% or more of their total scheduled work hours in the community.	
14	Assertive Engagement & Outreach by Integrated Team	3	Assertive engagement and outreach mechanisms vary greatly across treatment teams. There are a significant number of SE clients on treatment teams where no collaborative outreach and engagement strategies are used regularly. Additionally, a number of SE clients are on the NEC team where a 30-day service termination letter is provided when clients do not engage in SE or other services. Lastly, there was no evidence found of using family as a regular engagement strategy.	<p>When an SE client begins missing appointments or has difficulty engaging, it's imperative the Employment Specialist try and find out the reason(s) so the team can help the person solve any problems that might be getting in the way. Many of the outreach attempts noted were made via phone. The SE Team Leader might want to consider providing support to the Employment Specialists on how to outreach in other creative ways.</p> <p>The SE Team Leader might want to train SE staff around identifying and maintaining client supports, such as family. A client's support system can be an integral tool in engagement, outreach, and supporting clients' employment goals.</p>

#	Item	Rating	Rating Rationale	Recommendations
				The NEC team should reconsider use of the 30-day service termination letters with clients who are not engaging in services. The agency should also consider providing training to treatment teams about the many different engagement and outreach strategies that might be used to reengage clients. Treatment teams as a whole should make every effort to connect with clients in a variety of ways before closing a case.

MHC of Greater Manchester Score Sheet 2018	Rating 1 -5
Staffing	
1 Caseload size	5
2 Employment Services Staff	5
3 Vocational Generalists	5
Organization	
1 Integration of Rehab w/MH Treatment through team assignment	5
2 Integration of Rehab w/MH Treatment thru frequent contact	4
3 Collaboration between Employment Specialists & VR	5
4 Vocational Unit	5
5 Role of Employment Supervisor	5
6 Zero Exclusion Criteria	5
7 Agency Focus on Competitive Employment	3
8 Executive Team Support for SE	5
Services	
1 Work Incentive Planning	4
2 Disclosure	5
3 Ongoing, Work-based Vocational Assessment	5
4 Rapid Job Search for Competitive Employment	4
5 Individualized Job Search	3
6 Job Development- Frequent Employer Contact	4
7 Job Development- Quality of Employer Contact	5
8 Diversity of Job Types	3
9 Diversity of Employers	4
10 Competitive Jobs	5
11 Individualized Follow-along Supports	4
12 Time-unlimited Follow-along Supports	4
13 Community-based Services	5
14 Assertive Engagement & Outreach by Treatment Team	3
Total	110

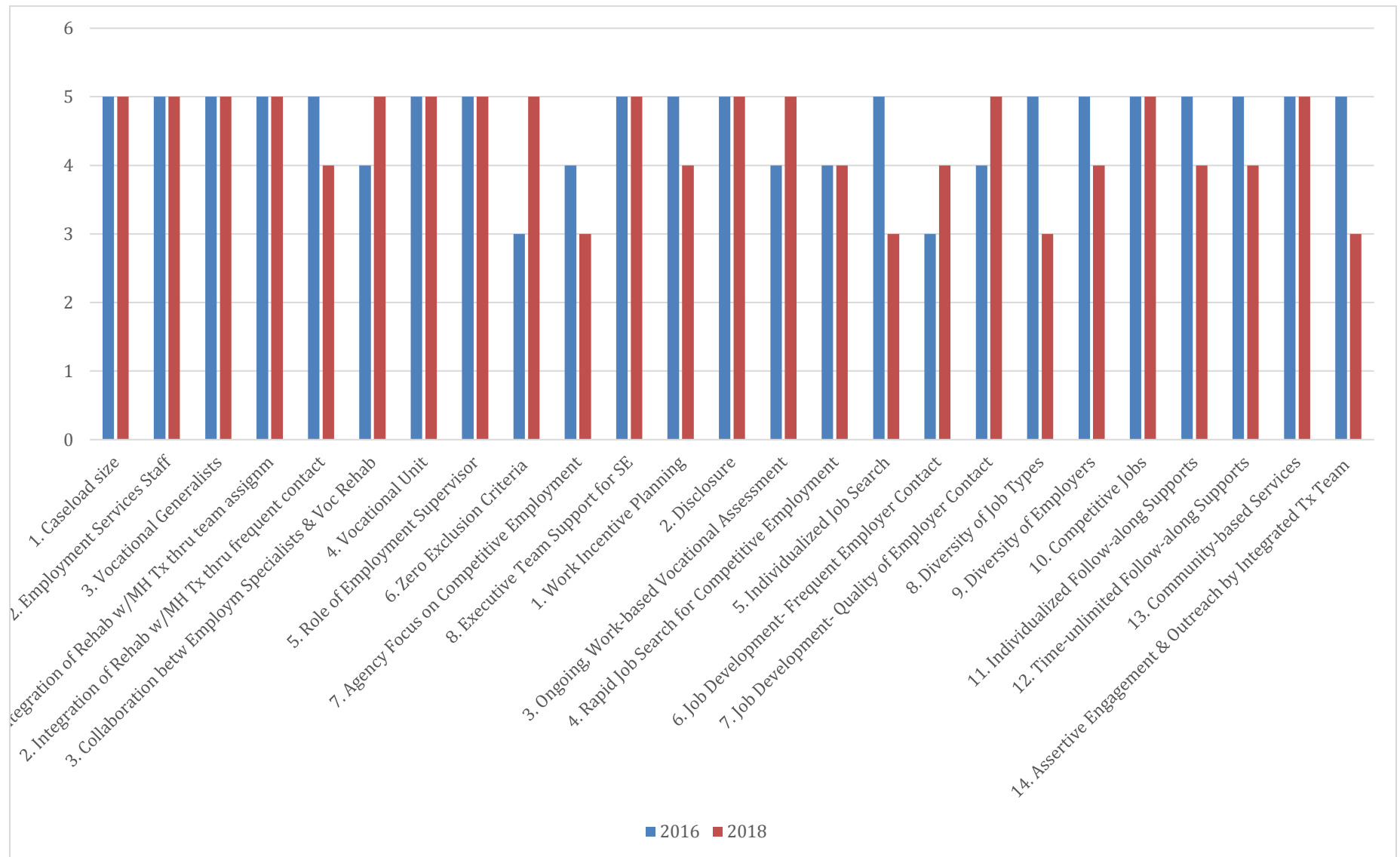
115 – 125 = Exemplary Fidelity
100 - 114 = Good Fidelity
74 – 99 = Fair Fidelity
73 and below = Not Supported Employment

MHC of Greater Manchester SE Items 2018



SE Score Sheet Year Comparisons	2016	2017
1. Caseload size	5	5
2. Employment Services Staff	5	5
3. Vocational Generalists	5	5
1. Integration of Rehab w/MH Treatment thru team assignment	5	5
2. Integration of Rehab w/MH Treatment through frequent contact	5	4
3. Collaboration between Employment Specialists & VR	4	5
4. Vocational Unit	5	5
5. Role of Employment Supervisor	5	5
6. Zero Exclusion Criteria	3	5
7. Agency Focus on Competitive Employment	4	3
8. Executive Team Support for SE	5	5
1. Work Incentive Planning	5	4
2. Disclosure	5	5
3. Ongoing, Work-based Vocational Assessment	4	5
4. Rapid Job Search for Competitive Employment	4	4
5. Individualized Job Search	5	3
6. Job Development- Frequent Employer Contact	3	4
7. Job Development- Quality of Employer Contact	4	5
8. Diversity of Job Types	5	3
9. Diversity of Employers	5	4
10. Competitive Jobs	5	5
11. Individualized Follow-along Supports	5	4
12. Time-unlimited Follow-along Supports	5	4
13. Community-based Services	5	5
14. Assertive Engagement & Outreach by Treatment Team	5	3
Total	116	110

MHC of Greater Manchester SE 2016 & 2018 Items



NH Department of Health and Human Services
Bureau of Mental Health Services

SE Fidelity Quality Improvement Plan Template
The Mental Health Center of Greater Manchester

Location: Manchester

Date: 04/10/18

SE Fidelity Area in Need of Improvement: 07- Agency Focus on Competitive Employment

SE Fidelity Baseline: ☐ 1 ☐ 2 ☒ 3 ☐ 4 ☐ 5

Improvement Target: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☒ 5 by 03/31/19 (date)

Improvement Strategies (select all that apply):

☐ Policy change ☒ Practice change ☒ Process change ☐ Workforce Development
☐ Infrastructure improvement ☐ Other _____

Action Plan (List the activities planned to achieve the improvement target. Include additional rows if needed):

Activity	Desired Outcome	Start Date	Expected Completion Date	Lead Person
Add employment stories to the waiting room digital media	Educate clients who are not yet employed about EBSE & success	06/01/18	09/01/18	Jennie Frechette
Add a "Vocational Corner" to the agency newsletter on a quarterly basis	Educate non-EBSE persons on value of the practice	06/01/18	3/31/19	Jennie Frechette

NH Department of Health and Human Services
Bureau of Mental Health Services

SE Fidelity Area in Need of Improvement: S5 – Individualized Job Search

SE Fidelity Baseline: ☐ 1 ☐ 2 ☒ 3 ☐ 4 ☐ 5

Improvement Target: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☒ 5 by 3/31/19 (date)

Improvement Strategies (select all that apply):

☐ Policy change ☐ Practice change ☐ Process change ☐ Workforce Development

☒ Infrastructure improvement ☐ Other _____

Action Plan (List the activities planned to achieve the improvement target. Include additional rows if needed):

Activity	Desired Outcome	Start Date	Expected Completion Date	Lead Person
Add/review section to our standardized vocational assessment form	Frequent review of clients specific goal and preferences for employment	07/01/18	09/01/18	Jennie Frechette
Reinforce with vocational counselors the importance of documenting clients vocational goal and preferences	Each client will have meaningful individualized goals	05/01/18	3/31/19	Jennie Frechette

NH Department of Health and Human Services
Bureau of Mental Health Services

SE Fidelity Area in Need of Improvement: S8 – Diversity of Job Types

SE Fidelity Baseline: ☐ 1 ☐ 2 ☒ 3 ☐ 4 ☐ 5

Improvement Target: ☐ 1 ☐ 2 ☐ 3 ☒ 4 ☐ 5 by 7/1/18 (date)

Improvement Strategies (select all that apply):

☐ Policy change ☐ Practice change ☐ Process change ☐ Workforce Development
☐ Infrastructure improvement ☐ Other _____

Action Plan (List the activities planned to achieve the improvement target. Include additional rows if needed):

Activity	Desired Outcome	Start Date	Expected Completion Date	Lead Person
Investigate Region 7's job availability and its variability and the current unemployment rate in Manchester	Increase EBSE awareness of the job openings in the area	05/01/18	07/01/18	Jennie Frechette
Review current list of jobs held	Understand the diversity	05/01/18	07/01/18	Jennie Frechette and Pete Costa

Include additional forms if needed.

NH Department of Health and Human Services
Bureau of Mental Health Services

SE Fidelity Area in Need of Improvement: S14 – Assertive Engagement and Outreach by Integrated Team

SE Fidelity Baseline: ☐ 1 ☐ 2 ☒ 3 ☐ 4 ☐ 5

Improvement Target: ☐ 1 ☐ 2 ☐ 3 ☒ 4 ☐ 5 by 12/31/18 (date)

Improvement Strategies (select all that apply):

☐ Policy change ☐ Practice change ☒ Process change ☐ Workforce Development
☐ Infrastructure improvement ☒ Other New code

Action Plan (List the activities planned to achieve the improvement target. Include additional rows if needed):

Activity	Desired Outcome	Start Date	Expected Completion Date	Lead Person
Create a new code for “outreach with support system” by SE and share with staff	Accurate documentation of contacts with clients support system	06/01/18	12/31/18	Jennie Frechette & Jane Guilmette

Include additional forms if needed.



Jeffrey A. Meyers
Commissioner

Katja S. Fox
Director

STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION FOR BEHAVIORAL HEALTH
BUREAU OF MENTAL HEALTH SERVICES

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May 4, 2018

William Rider, CEO
The Mental Health Center of Greater Manchester
401 Cypress Street
Manchester, NH 03103

Dear Mr. Rider,

The New Hampshire Department of Health and Human Services, Bureau of Mental Health Services, received Quality Improvement Plan submitted on April 24, 2018 that was in response to the SE Fidelity Review conducted on March 20, 2018 through March 22, 2018. I am happy to inform you that this QIP has been accepted. At the Department's discretion, information and documentation may be requested to monitor the implementation and progress of the quality improvement areas identified for incremental improvement. Follow up will be conducted on a quarterly basis using the attached SE Fidelity Review Quality Improvement Plan Progress Report.

Please contact myself if you have any questions regarding this correspondence at 603-271-8376, or by e-mail: Lauren.Quann@dhhs.nh.gov.

Many thanks for your dedication to provide quality services to individuals and families in your region. We greatly look forward to our continued work together.

Sincerely,

A handwritten signature in cursive script, reading "Lauren Quann".

Lauren Quann, MS
Administrator of Operations
Bureau of Mental Health Services
Lauren.Quann@dhhs.nh.gov
603-271-8376

LAQ/laq

Enclosures: MHCGM Quarter 1 SE Progress Report
CC: Karl Boisvert, Diana Lacey, Susan Drown, Julianne Carbin